

**HIGHER EDUCATIONAL AIDS BOARD
TECHNICAL EXCELLENCE SCHOLARSHIP PROGRAM
PO BOX 7885
MADISON WI 53707-7885**

Name_____	SSN_____	Date of Birth_____
Street Address_____	City_____	State____ Zip_____
Email Address_____	Phone Number_____	
High School_____		

CONGRATULATIONS ON BEING AWARDED THE TECHNICAL EXCELLENCE SCHOLARSHIP!

- ➡ Please complete and return this sheet to our address above, regardless of what your post high school plans may be, **as soon as possible**, but no later than September 30, 2016.
- ➡ In order to disburse your Technical Excellence Scholarship (TES) funds, we must know which college you plan to attend in 2016-2017.

Please show the name of the college you will attend in 2016-2017 here:	
Name of College	
Location of College	

- ➡ If you do not plan to enroll full-time at a participating Wisconsin institution by September 30, 2016, you will not be eligible to receive funds from your TES. In that case, **please sign the release statement on the reverse so another student can use the scholarship.**

By my signature, I attest to the accuracy of the information above, and I give permission to the college or university I am attending to release my credits earned and my grade point averages (GPAs) to the Higher Educational Aids Board (HEAB) at HEAB's request. Credits earned and GPAs are reported to HEAB for purposes of monitoring continuing eligibility for the Technical Excellence Scholarship (AES) and will be reported as long as the student may receive the AES.

Signature of Scholar _____ **Date** _____

Wisconsin Technical Colleges

Blackhawk Technical College	Lakeshore Technical College	Moraine Park Technical College	Southwest WI Technical College
Chippewa Valley Technical College	Madison Area Technical College	Nicolet Area Technical College	Waukesha County Technical College
Fox Valley Technical College	Mid-State Technical College	Northcentral Technical College	Western Technical College
Gateway Technical College	Milwaukee Area Technical College	Northeast WI Technical College	WI Indianhead Technical College

If you do not attend one of these colleges, you will not be eligible to receive TES funds. The TES will then be awarded to the next qualified applicant.

If you cannot attend one of these colleges by September 30, 2016 due to illness, military service, study abroad, or some other circumstance beyond your control, do not sign the release. Contact us directly by email, phone or email to discuss a temporary waiver of the enrollment requirement.

Release Statement:

I do not intend to accept the Technical Excellence Scholarship. I forfeit it, with the understanding that my forfeiture is permanent, and I release it for the use of an alternate student in my high school class.

Name of Student: _____

Name of High School: _____

Signature of Student: _____ Date: _____

Signature of Parent: _____ Date: _____

Name of College: (Optional) _____

Nancy Wilkison, TES Coordinator
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